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## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attomey Docket No.	ELTE 02894 PTUS	_
First Inventor	James HAMAKER	PTC
Title	AUXILIARY EYEWEAR DISPLAY	U.S.
Express Mail Label No.	EV 184578059 US	47

		ON ELEMENTS  ning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	22
2. Applicar See 37 3. Specific (preferred	an original and a c nt claims small o CFR 1.27. ation d arrangement se	[Total Pages 13 ] t forth below)	Computer Progra  8. Nucleotide and/or An  (if applicable, all nece	nino Acid Sequence Submission	<u>.</u>
- Cross F - Statem - Refere or a co - Backgr	otive title of the inv Reference to Rela ent Regarding Fe nce to sequence li mputer program li round of the Inventummary of the Inventummary	ted Applications d sponsored R & D isting, a table, sting appendix tion	_	on Sequence Listing on: ROM or CD-R (2 copies); or	
	escription of the D		c. Statement	s verifying identity of above copies	
- Detaile -}- Claim(s	d Description		ACCOMPANY	ING APPLICATION PARTS	5
- Abstrac	ct of the Disclosur	e 113)   [Total Sheets4]	9. Assignment Pa 10. 37 CFR 3.73(b		
5. Oath or Deck	aration /ly executed (or	[ <i>Total Sheets</i> ] iginal or copy)	12. Information Di	ation Document (if applicable) sclosure	s
b. Cop	y from a prior a continuation/div	pplication (37 CFR 1.63(d)) isional with Box 18 completed)			
" C	DELETION OF Signed statement a name in the prior a 1.63(d)(2) and 1.3	attached deleting inventor(s) application, see 37 CFR	15. Certified Copy (if foreign prio	echically iterrized) of Priority Document(s) rity is claimed) n Request under 35 U.S.C. 122 oplicant must attach form PTO/SB/3	5
		pet. See 37 CFR 1.76	or its equivale		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:					
Contin	uation	Divisional Continu	uation-in-part (CIP) of pri	or application No.:	
Prior application information: Examiner Art Unit:					
		19. CORRESPO	NDENCE ADDRESS		
Custom	ner Number:		OR I	Correspondence address below	N
Name	John G. Fische				
Address Storm & Hemingway, LLP					
City	8117 Preston F	Road, Ste 460	State Texas	Zip Code 75225	
Country	Dallas USA		Telephone 214/292-8997	Fax 214/292-8	999
			Registration No. (Attorne	y/Agent)  41,748	
Name (Print/Ty Signature	pe) John G. F	scher	, 109/01/2007/10: (/ 11/07/10	<del></del>	)4
Signature	1	My the			and by the

This collection of information is required by 37 CFR (1.53(b)). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gatheripg, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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ರ್ <b>FEE TRANSMITTAL</b>	_
for EV 2004	F
for FY 2004	

Effective 10/01/2003. Patent fees are subject to annual revision.

✓ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number	tbd		
Filing Date	January 29, 2004		
First Named Inventor	James HAMAKER		
Examiner Name	tbd		
Art Unit	tbd		
Attorney Docket No.	ELTE 02894 PTUS		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
✓ Check Credit card Money Other None	3. ADDITIONAL FEES				
Order C	Large Entity   Small Entity				
Deposit Account:	Fee Fee Fee Fee Fee Description				
Deposit Account	Code (\$) Code (\$) Fee Paid				
Number Deposit	1051 130 2051 65 Surcharge - late filing fee or oath  1052 50 2052 25 Surcharge - late provisional filing fee or				
Account	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet				
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification				
Chatge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action				
	1251 110 2251 55 Extension for reply within first month				
FEE CALCULATION	1252 420 2252 210 Extension for reply within second month				
1. BASIC FILING FEE Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month				
Fee Fee Fee Fee <u>Fee Description</u> Fee Paid	1254 1,480 2254 740 Extension for reply within fourth month				
Code (\$) Code (\$)	1255 2,010 2255 1,005 Extension for reply within fifth month				
1001 770 2001 385 Utility filing fee 385.00	1401 330 2401 165 Notice of Appeal				
1002 340 2002 170 Design filing fee	1402 330 2402 165 Filing a brief in support of an appeal				
	1403 290 2403 145 Request for oral hearing				
1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding				
	1452 110 2452 55 Petition to revive - unavoidable				
SUBTOTAL (1) (\$) 385.00	1453 1,330 2453 665 Petition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,330 2501 665 Utility issue fee (or reissue)				
Extra Claims below Fee Paid	1502 480 2502 240 Design issue fee				
Total Claims 7 -20** = X = I	1503 640 2503 320 Plant issue fee				
Claims — — - 3 — —	1460 130 1460 130 Petitions to the Commissioner				
Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)				
Large Entity   Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt				
Fee Fee Fee Fee Description Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))				
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b))				
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770 2801 385 Request for Continued Examination (RCE)				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application				
295.00	Other fee (specify)				
30B101AL (2)	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				
**or number previously paid, if greater; For Reissues, see above	(Complete (if applicable))				

SUBMITTED BY Registration No. 41,748 Telephone 214/292-8997 John G. Fischet Name (Print/Type) (Attorney/Agent) 01 Signature

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

James HAMAKER, et al.

For: AUXILIARY EYEWARE DISPLAY MOUNT

MAIL STOP PATENT APPLICATION Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **EXPRESS MAIL CERTIFICATE**

Express Mail Number:

EV 184578059 US

Date of Deposit:

January 29, 2004

I hereby certify that the following attached papers and fee:

Utility patent application transmittal cover sheet;

Fee transmittal sheet;

Utility patent application;

Drawings;

Check in the amount of 385.00; and

Return postcard.

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" to the MAILSTOP PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Angela Wilson

Typed or Printed Name

Signature